

#3



PTO/SB/01 (03-01)
 Approved for use through 10/31/2002. OMB 0651-0032
 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
 Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR
 DESIGN
 PATENT APPLICATION
 (37 CFR 1.63)**

☐ Declaration
 Submitted With Initial
 Filing
 OR
☒ Declaration
 Submitted after Initial
 Filing (surcharge
 (37 CFR 1.16 (e))
 required)

Attorney Docket Number 52126.00008 (Digeo 95)

First Named Inventor Michael Florence

COMPLETE IF KNOWN

Application Number 09/877,549

Filing Date June 8, 2001

Group Art Unit Unknown

Examiner Name Unknown

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Systems and Methods for Automatic Personalizing of Channel Favorites in a Set Top Box

the specification of which (Title of the Invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

06/08/2001

as United States Application Number or PCT International

Application Number 09/877,549 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent ApplicationDirect all correspondence to: ☐ Customer Number or Bar Code Label OR ☒ Correspondence address below

SQUIRE, SANDERS & DEMPSEY LLP

Name

600 Hansen Way

Address

Palo Alto

CA

94304

City**State****ZIP**

U.S.A.

(650) 856-6500

(650) 856-3619

Country**Telephone****Fax**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:☐ A petition has been filed for this unsigned inventor

Given Name Michael
(first and middle [if any])

Family Name Florence
or Surname

Inventor's
Signature

Michael Flumen

Date

8/2/01

North Bend

WA

U.S.A.

U.S.

Residence: City**State****Country****Citizenship**

1125 SE 11th Place

Mailing Address

North Bend

WA

98045

U.S.A.

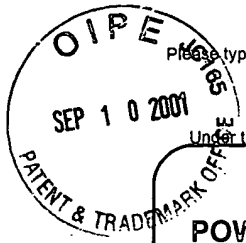
City**State****Zip****Country****NAME OF SECOND INVENTOR:**☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])

Family Name
or Surname

Inventor's
Signature

Date**Residence: City****State****Country****Citizenship****Mailing Address****City****State****Zip****Country**☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.



Please type a plus sign (+) inside this box



PTO/SB/81 (02-01)

#3

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

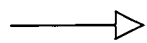
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/877,549
Filing Date	June 8, 2001
First Named Inventor	Michael Florence
Group Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	52126.00008 (Digeo 95)

I hereby appoint:

☐ Practitioners at Customer Number
OR



Place Customer
Number Bar Code
Label here

☒ Practitioner(s) named below:

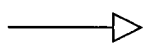
Name/ Registration Number
Marc A. Sockol, Reg. No. 40,823; Daryl C. Josephson, Reg. No. 37,365; Arnold de Guzman, Reg. No. 39,955; Cameron Kerrigan, Reg. No. 44,826; Patrick D. Benedicto, Reg. No. 40,909; David B. Abel, Reg. No. 32,394; Nathan Lane, Reg. No. 43,738; Lorinda Howland, Reg. No. 42,671; Michael Lechter, Reg. No. 27,350; David Koo, Reg. No. 46,839; David Rogers, Reg. No. 38,287; William Bachand, Reg. No. 34,980; Aaron Wininger, Reg. No. 45,229; Paul A. Durdik, Reg. No. 37,819; Paul J. Meyer 47,791; Victoria L. Nicholson, Reg. No. 47,823; and Fariba Sirjani, Reg. No. 47,947.

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.
OR

☐ Practitioners at Customer Number
OR



Place Customer
Number Bar Code
Label here

<input type="checkbox"/> Firm or Individual Name	SQUIRE, SANDERS & DEMPSEY L.L.P.				
Address	600 Hansen Way				
City	Palo Alto	State	CA	ZIP	94304
Country	U.S.A.				
Telephone	(650) 856-6500	Fax	(650) 856-3619		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Michael Florence
Signature	
Date	8/2/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

SIGNATURE of Applicant or Assignee of Record

Name	
Signature	
Date	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 form is submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.